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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration submitted with Initial Filing

Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16 (e)) required)

Attorney Docket Number	PCS10963AKSR
First Named Inventor	Stephen JENKINSON
COMPLETE IF KNOWN	
Application Number	Not yet assigned
Filing Date	Not yet assigned
Group Art Unit	Not yet assigned
Examiner Name	Not yet assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HISTAMINE RECEPTOR ANTAGONISTS

(Title of the Invention)

the specification of which
 is attached hereto

OR

was filed on (MM/DD/YYYY) [REDACTED] as United States Application Number or PCT International

Application Number [REDACTED] and was amended on (MM/DD/YYYY) [REDACTED] (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
0101223.6	GB	01/17/2001	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/270,641	02/22/2001	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B sheet attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Mark Anthony		O'REILLY				
Inventor's Signature	<i>Mark Anthony O'Reilly</i>				Date	23/11/01
Residence: City	County of Kent	State	Country	England	Citizenship	GB
Post Office Address	Pfizer Global Research and Development					
Post Office Address	Ramsgate Road, Sandwich					
City	County of Kent	State	Zip	CT13 9NJ	Country	England
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Michael Andrew		TREVETHICK				
Inventor's Signature	<i>Michael Andrew Trevethick</i>				Date	23/11/01
Residence: City	County of Kent	State	Country	England	Citizenship	GB
Post Office Address	Pfizer Global Research and Development					
Post Office Address	Ramsgate Road, Sandwich					
City	County of Kent	State	Zip	CT13 9NJ	Country	England
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature					Date	
Residence: City		State		Country	Citizenship	
Post Office Address						
Post Office Address						
City		State		Zip		Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature					Date	
Residence: City		State		Country	Citizenship	
Post Office Address						
Post Office Address						
City		State		Zip		Country

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DECLARATION ---- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 U.S.C. 1.56, which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Customer Number _____ or _____

Place Customer Number Bar Code Label here

Registered practitioner(s) name/registration number listed below

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Gregg C. Benson	30,977	B. Timothy Creagan	39,156
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Lorraine B. Ling	35,251	Seth H. Jacobs	32,140
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Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unsigned inventor

Given Name (first and middle if any)		Family Name or Surname			
Stephen		JENKINSON			
Inventor's Signature				Date	11/11/2001
Residence: City	North Carolina	State	Country	United States	Citizenship
Post Office Address	Pfizer Global Research and Development				
Post Office Address	Ramsgate Road, Sandwich				
City	County of Kent	State	Zip	CT13 9NJ	Country
					England